

Associate Action Plan / Performance Improvement Plan

Name: Position: Store: Date to Position: Date of Hire:

Managers Name: Title:

Improvement Plan #1.

What needs to be done differently? (Specific actions, behaviors the associate must demonstrate)	How will the Associate accomplish these changes?	How will performance be measured? (What is the goal, who/what will measure?)	By when should we see improvement?

Improvement Plan #1 Follow-up

Follow-up	Manager Comments	Managers and Associates Initials
1 st Follow-up Date _ <input type="checkbox"/> Meets Expectations <input type="checkbox"/> Does Not Meet		
2 st Follow-up Date _ <input type="checkbox"/> Meets Expectations <input type="checkbox"/> Does Not Meet		
3 st Follow-up Date <input type="checkbox"/> Meets Expectations <input type="checkbox"/> Does Not Meet		